

SERIAL NUMBER 09/398,107	FILING DATE 09/16/99	CLASS 424	GROUP ART UNIT 1615	ATTORNEY DOCKET NO. LA23B
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APPLICANT PETER TIMMIS, MERSEYSIDE, UNITED KINGDOM; ANDREW B. DENNIS, MERSEYSIDE, UNITED KINGDOM; KIREN A. VYAS, KENT, UNITED KINGDOM.

4-1502
88
CONTINUING DOMESTIC DATA***

VERIFIED

THIS APPLN IS A CIP OF 09/044,446 03/19/98 NOW ABANDONED,

371 (NAT'L STAGE) DATA***

VERIFIED

FOREIGN APPLICATIONS***

VERIFIED

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 10/07/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY GBX	SHEETS DRAWING 0	TOTAL CLAIMS 71	INDEPENDENT CLAIMS 3
Verified and Acknowledged	Examiner's Initials			Initials			

ADDRESS BURTON RODNEY
BRISTOL MYERS SQUIBB COMPANY
P O BOX 4000
PRINCETON NJ 08543-4000

TITLE BIPHASIC CONTROLLED RELEASE DELIVERY SYSTEM FOR HIGH SOLUBILITY
PHARMACEUTICALS AND METHOD

FILING FEE RECEIVED

\$1,808

FEES: Authority has been given in Paper
No. _____ to charge/credit DEPOSIT ACCOUNT
NO. _____ for the following:

- ☐ All Fees
- ☐ 1.16 Fees (Filing)
- ☐ 1.17 Fees (Processing Ext. of time)
- ☐ 1.18 Fees (Issue)
- ☐ Other _____
- ☐ Credit _____



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 UNITED STATES PATENT AND TRADEMARK OFFICE
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 www.uspto.gov


Bib Data Sheet

CONFIRMATION NO. 9636

SERIAL NUMBER 09/398,107	FILING DATE 09/16/1999 RULE	CLASS 424	GROUP ART UNIT 1615	ATTORNEY DOCKET NO. LA23B
APPLICANTS PETER TIMMINS, MERSEYSIDE, UNITED KINGDOM; ANDREW B. DENNIS, MERSEYSIDE, UNITED KINGDOM; KIREN A. VYAS, KENT, UNITED KINGDOM;				
** CONTINUING DATA ***** THIS APPLICATION IS A CIP OF 09/044,446 03/19/1998 ABN				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/07/1999				
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWING	TOTAL CLAIMS 71
INDEPENDENT CLAIMS 3				
ADDRESS 023914				
TITLE BIPHASIC CONTROLLED RELEASE DELIVERY SYSTEM FOR HIGH SOLUBILITY PHARMACEUTICALS AND METHOD				
FILING FEE RECEIVED 1808	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	